

An Overview: Single Point of Access (SPOA) Case Management/ACT Services

What is Single Point of Access (SPOA) Case Management/ACT?

The SPOA Case Management/ACT project connects eligible applicants with appropriate vacancies in the case management/ACT system for individuals with psychiatric disabilities. SPOA Case Management/ACT significantly expands the ability for referral sources to access case management/ACT services. SPOA Case Management/ACT also gathers data on case management/ACT needs and the availability of services for consumers with special needs. SPOA collects information on the case management/ACT referral process and movement through the case management/ACT system. The overall goals of the project are to expedite access to case management/ACT services for people with psychiatric disabilities and to collect data on case management/ACT needs and the availability of services for consumers with special needs.

What is the role of NYS Office of Mental Health and NYC Department of Health and Mental Hygiene?

As a central element of the NYS OMH Evidence Based Practices Initiative, SPOA Case Management/ACT is a joint demonstration project between the New York State Office of Mental Health and the New York City Department of Health and Mental Hygiene. OMH is organizing similar SPOA projects in counties throughout New York State. Along with consumer and provider representatives, OMH and DOHMH have been working together to design New York City's SPOA Case Management/ACT project.

What is the SPOA Project and who is eligible to participate?

The SPOA Case Management Brooklyn pilot project began in October 2002. Brooklyn ACT teams became a part of the project in June 2003. Case management and ACT services in Manhattan were added in September, 2003. Queens, Bronx and Staten Island were added in October, 2004. Applicants are eligible for the project if they have a serious and persistent mental illness, and reside or will reside in one of the five boroughs of New York City. By limiting the initial scope of the project, the pilot program was designed to ensure efficiency and accuracy. All referrals for case management and/or ACT services in New York City must use the SPOA process.

What is the role of the Center for Urban Community Services (CUCS)?

CUCS has been contracted to provide administrative support for the SPOA Case Management/ACT project. Using a computerized database that tracks case management/ACT vacancies and services offered by case management/ACT providers, CUCS assists consumers and their referring workers in locating a program that meets an applicant's needs. CUCS' team of Case Management/ACT Consultants review each Case Management/ACT application, consults with the referring worker, then using the case management/ACT database, generates two case management or ACT referrals for each applicant. CUCS also tracks and reports referral information to NYS OMH and NYC DOHMH. In addition, CUCS provides training for referral sources and case management/ACT providers on the technical and clinical aspects of the case management/ACT referral process and participates in the SPOA case planning meetings.

How does SPOA impact consumers?

Some mental health consumers have been unable to access case management or ACT services in our existing case management/ACT system. SPOA will significantly expand and make accessible information about services and vacancies in case management and ACT programs, as well as provide information about who is getting access and who is not getting access to case management services. The data gathered will help to determine what types of services should be developed in the future to better meet the service needs of all mental health consumers.

How does SPOA impact case management/ACT providers?

Case Management and ACT providers will have an ongoing flow of case management/ACT applications to their program, enabling them to fill vacancies expediently. If a Case Management or ACT provider is not able to provide the level of service a consumer requires, the provider will be able to easily access another provider through SPOA.

How does SPOA impact referral sources?

The Case Management/ACT packet remains unchanged. Referral Sources will have access to current vacancies and a list of all existing programs and the services they provide. Referral sources will continue to have the ability to request a specific provider. Referral sources will have access to CUCS' Case Management/ACT Consultants, who consult on the case, offer any necessary technical assistance and provide two referrals. By centralizing and standardizing the process, SPOA is intended to make referrals more efficient and expedient.

What types of enhanced support are available?

OMH is willing to consider funding any reasonable requests for concrete services or other supports that would help a case management program provide a more adequate service delivery to a consumer who is placed in their program as an alternate level of care until a vacancy is available for the appropriate level of service. All requests for enhanced support will be reviewed and approved/rejected by OMH. All funding for enhanced support will be connected to the consumer and will be discontinued if the consumer leaves the program, or no longer requires the enhanced support. OMH will schedule periodic reviews with the provider agency to determine ongoing need for enhanced support.

What is the purpose of and who attends SPOA case planning meetings?

In cases where there is disagreement regarding the level of care the consumer needs, OMH convenes a case-planning meeting to discuss how an applicant's needs can best be met. The following people are present at case planning meetings: OMH representative, DOHMH representative, peer advocate, representative from the case management provider that received the referral, CUCS representative, and representatives from other agencies available to provide services. A representative of the referring agency is strongly encouraged to participate. When necessary, a conference call can be arranged to facilitate referral source participation. The case planning meeting may result in one of the following: an approval for alternate level of care, or a decision that consumer needs the level of care originally requested.